

POSITION	INITIALS	IC NO.	DATE
FEE DETERMINATION	MH	10-04-01	
O.I.P.E. CLASSIFIER		10-11-01	
FORMALITY REVIEW	CL	1141	6/50/01
RESPONSE FORMALITY REVIEW	TA	1113	12-19-01

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	01-05-01
Original	01-16-01
1	15-21
2	03-03
3	✓ ✓ ✓
4	✓ ✓ ✓
5	✓ ✓ ✓
6	✓ ✓ ✓
7	✓ ✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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